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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(e)] 12/08/2006

To Method and Apparatus for Conducting...

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Application Number 09/640,369 Filed 08/17/2000 Por Method and Apparatus for Conducting...

Typed or printed Auzville Jackson, Jr. Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.

Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced 250 by half, and the resulting fee is: A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. . I have enclosed a duplicate copy of this sheet. A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. am the applicant/inventor. assignee of record of the entire interest. Auzville Jackson See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) Typed or printed name atterney or agent of record. 17.306 804-740-6828 Registration number _ Telephone number attorney or agent acting under 37 CFR 1.34. 12/08/2006 Registration number if acting under 37 CFR 1.34. NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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